

PART B—ISSUE FEE TRANSMITTAL

MAILING INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE. Blocks 2 through 6 should be completed where appropriate. All further correspondence including the issue Fee Receipt, the Patent, advance orders and notification of maintenance fees will be mailed to addresses entered in Block 1 unless you direct otherwise, by: (a) specifying a new correspondence address in Block 3 below; or (b) providing the PTO with a separate "FEE ADDRESS" for maintenance fee notifications with the payment of issue Fee or thereafter. See reverse for Certificate of Mailing, below.

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DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Box Issue Fee, Assistant Commissioner for Patents, Washington D.C. 20231

2. INVENTOR(S) ADDRESS CHANGE (Complete only if there is a change)

INVENTOR'S NAME

Street Address

City, State and Zip Code

CO-INVENTOR'S NAME

Street Address

City, State and Zip Code

☐ Check if additional changes are enclosed

1. CORRESPONDENCE ADDRESS

CROCKETT & FISH
1440 N HARBOR BLVD
SUITE 706
FULLERTON CA 92835

34M1/1125

DEC 29 1997

APPLICATION NO.

FILING DATE

TOTAL CLAIMS

EXAMINER AND GROUP ART UNIT

DATE MAILED

First Named
Applicant

08/934,014

08/26/97

009

CASAREGOLA, L

3403

11/25/97

RAD.

ASHOK

TITLE OF
INVENTION

INTEGRATED DRYING OF FEEDSTOCK FEED TO INTEGRATED COMBINED-CYCLE
GASIFICATION PLANT

ATTY'S DOCKET NO.

CLASS-SUBCLASS

BATCH NO.

APPLN. TYPE

SMALL ENTITY

FEE DUE

DATE DUE

3

210-102-D1-F

060-039,020

U61

UTILITY

NO

\$1320.00

02/25/98

3. Correspondence address change (Complete only if there is a change)

01/21/1998 LBERGER 00000172 08934014
01 FC:142 1320.00 DP
02 FC:561 9.00 DP

4. For printing on the patent front page, list the names of not more than 3 registered patent attorneys or agents OR, alternatively, the name of a firm having as a member a registered attorney or agent. If no name is listed, no name will be printed.

1 CROCKETT & FISH

2

3

5. ASSIGNMENT DATA TO BE PRINTED ON THE PATENT (print or type)

(1) NAME OF ASSIGNEE:

FLUOR DANIEL, INC.

(2) ADDRESS: (CITY & STATE OR COUNTRY)

3353 Michelson Dr. IRVINE, CA 92698

6a. The following fees are enclosed:

☒ Issue Fee ☒ Advance Order - # of Copies 3

6b. The following fees should be charged to:

DEPOSIT ACCOUNT NUMBER 500-341

(ENCLOSE A COPY OF THIS FORM)

☐ Issue Fee ☐ Advance Order - # of Copies

☐ Any Delinquencies in Enclosed Fees

The COMMISSIONER OF PATENTS AND TRADEMARKS is requested to apply the issue fee to the application identified above.

(Authorized Signature)

[Signature]

(Date)

12 Dec 1997

NOTE: The issue fee will not be accepted from anyone other than the applicant, a registered attorney or agent, or the assignee or other party in interest as shown by the records of the Patent and Trademark Office.

A ☐ This application is NOT assigned.

☐ Assignment previously submitted to the Patent and Trademark Office.

☐ Assignment is being submitted under separate cover. Assignment should be directed to Box ASSIGNMENTS.

PLEASE NOTE: Unless an assignee is identified in Block 5, no assignee data will appear on the patent. Inclusion of assignee data is only appropriate when an assignment has been previously submitted to the PTO or is being submitted under separate cover. Completion of this form is NOT a substitute for filing an assignment.

Certificate of Mailing

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Assistant Commissioner for Patents
Washington, D.C. 20231

on: 12/19/97 (Date)

(Name of person making deposit)

(Signature)

(Date)